United States Courts
Southern District of Texa

APR 07 2020

David J. Bradley, Clerk of Court

Pro Se 14 (Rev. 12/16) Complaint for Violation of Civil Rights (Prisoner)

# UNITED STATES DISTRICT COURT

| for   | the                   |   |  |
|---|-----------------------|---|--|
| . Distri  | ict of                |   |  |
| - And the control of | Division              |   |  |
| W = A TO A L  | Case No.              |   |  |
| Plaintiff(s)  Plaintiff(s)  (Write the full name of each plaintiff who is filling this complaint.  If the names of all the plaintiff's cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)  -Y-   |                       | (to be filled in by the Clerk's Office) |  |
| Detection Officers C.L.Minor, McClowl  Defendant(s)  (Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names. Do not include addresses here.)  | )<br>)<br>)<br>)<br>) |   |  |

#### COMPLAINT FOR VIOLATION OF CIVIL RIGHTS

(Prisoner Complaint)

#### NOTICE

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should not contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include only: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee or an application to proceed in forma pauperis.

# Pro Se 14 (Rev. 12/16) Complaint for Violation of Civil Rights (Prisoner)

# I. The Parties to This Complaint

#### A. The Plaintiff(s)

| Provide the information belo | w for each plaintiff named in the complaint. | Attach additional pages if |
|------------------------------|--|----------------------------|
| needed.                      |  | . •                        |
|                              | X-211  | a Disser M                 |

Name
All other names by which
you have been known:

\*\*JONATHAN WAYDE RUSSEUL®

\*\*JONATHAN WAYDE RUSSEU

you have been known:

1D Number

Current Institution

Address

Sinie

# B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. Make sure that the defendant(s) listed below are identical to those contained in the above caption. For an individual defendant, include the person's job or title (If known) and check whether you are bringing this complaint against them in their individual capacity or official capacity, or both. Attach additional pages if needed.

| Name Job or Title (if known) Shield Number Employer Address | Detention Officer  Harris County Jan (SDDA pol)  Huston Tx 20002  City State Zip Code |
|---|---|
| Defendant No. 2  Name  Job or Title (if known)              | Individual capacity Official capacity  ACCOULT  OR FEATION OFFICEC                    |
| Shield Number<br>Employer<br>Address                        | Laster SA  Houster SA  City Singe Zip Code  Undividual capacity Official capacity     |

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|----------|------------------------|---|
|          |                        | Defendant No. 3  Name  Job or Title (If known)  Shield Number  Employer  Address  City State Zip Code   |
|          |                        | Defendant No. 4  Name  Job or Title (If known)  Shield Number  Employer  Address  City State Zip Code  Individual capacity  Official capacity   |
| II.      | Under<br>immu<br>Feder | for Jurisdiction  142 U.S.C. § 1983, you may sue state or local officials for the "deprivation of any rights, privileges, or nities secured by the Constitution and [federal laws]." Under Bivens v. Six Unknown Named Agents of al Bureau of Narcotics, 403 U.S. 388 (1971), you may sue federal officials for the violation of certain tutional rights.  Are you bringing suit against (check all that apply):  Federal officials (a Bivens claim)  State or local officials (a § 1983 claim) |
|          | В.                     | Section 1983 allows claims alleging the "deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws]." 42 U.S.C. § 1983. If you are suing under section 1983, what federal constitutional or statutory right(s) do you claim is/arc being violated by state or local officials?   |
|          | C.                     | Assaulted by Officers and two sefavore acommons.  Plaintiffs suing under Bivens may only recover for the violation of certain constitutional rights. If you are suing under Bivens, what constitutional right(s) do you claim is/are being violated by federal officials?   |

| ro Se I | 4 (Rev. 12/                   | 16) Complaint for Violation of Civil Rights (Prisoner)  |
|---------|-------------------------------|---|
|         |                               |   |
|         | D.                            | Section 1983 allows defendants to be found liable only when they have acted "under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia." 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color of state or local law. If you are suing under <i>Bivens</i> , explain how each defendant acted under color of federal law. Attach additional pages if needed.                             |
|         |                               | *While incorrowed awaiting court, Divertion stooff members did knowingly assault me, displaying an unmerited unwarrested use of force on two occurring in Harris County Joil 1200 Baker St. Houston, TX 77003 *Twoslparote documents accorsions resulting in XRAYS of my person confiner Status two se parate broken bone instances.  |
| I.      | Prisor                        | *Twoseparate documented occassions resulting in XRAYS of my person confiner status two se parate broken bone intences.  |
|         | mujea                         | to whether you are a prisoner or other contined person as follows (check on that apply):  |
|         |                               | Pretrial detainee   |
|         | Ш                             | Civilly committed detainee  |
|         |                               | Immigration detainee  |
|         |                               | Convicted and sentenced state prisoner  |
|         |                               | Convicted and sentenced federal prisoner  |
|         |                               | Other (explain)   |
| ٧.      | Statem                        | ent of Claim  |
|         | alleged<br>further<br>any cas | s briefly as possible the facts of your case. Describe how each defendant was personally involved in the wrongful action, along with the dates and locations of all relevant events. You may wish to include details such as the names of other persons involved in the events giving rise to your claims. Do not cite ses or statutes. If more than one claim is asserted, number each claim and write a short and plain ent of each claim in a separate paragraph. Attach additional pages if needed. |
|         |                               | n/a   |
|         | B.                            | If the events giving rise to your claim arose in an institution, describe where and when they arose.  I SDIA pod Officer CC. MMer 19 6B1 pud Officer Mclaud broke my stemum fractured my left rib cage  (XRATS confirm both claims!)  |

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V.

VI.

| C. What date and approximate time did the events giving rise to your claim(s) occur?  (1) Cfficer Miner Claim — hoteren merch-may 2019 on the here 0-25-19   |              |
|--|--------------|
| DAFree McClaud Clave 1-7-20  |              |
| What are the facts underlying your claim(s)? (For example. What happened to you? Who did what? Was anyone else involved? Who else saw what happened?)  * Two separate enerts (ausoully)  (DOFFirer mixer did stomp on mybout while I was being handcotted in Specaking my sternum. XRATS confirm on and about said date.  DOFFirer McClaul did beat meup and break/fractive my left ribeage. | DD Apa       |
| Injuries   |              |
| If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive.   |              |
| DXRAYS to Sternum confirmed broken (2019 nor-may)  |              |
| DXRAYS to Sternum confirmed broken (2019 mar-may)  DXRAYS to 1 of trib cage confirmed Fracture (2020)1   | <u>-7-20</u> |
| Relief   |              |
| State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.  |              |
| Monetary Relief in the amount of 8 million dollars<br>DY million dollars From Officer CL. Minor.   | Stold        |
| (1) 4 million dellars train Others Ct. Minor.  |              |
| D4 million dollars from Officer McCloud  | `            |
| A placed on incomportable list (keep separate list) for soid officers.   | M            |
| said officers.   |              |

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# VII. Exhaustion of Administrative Remedies Administrative Procedures

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted."

Administrative remedies are also known as grievance procedures. Your case may be dismissed if you have not exhausted your administrative remedies.

| Did and district the state of t |
|--|
| Did your claim(s) arise while you were confined in a jail, prison, or other correctional facility?  Yes  |
| □ No   |
| If yes, name the jail, prison, or other correctional facility where you were confined at the time of the events giving rise to your claim(s).  San 2019 - present to days down Still Machine St.   |
| Does the jail, prison, or other correctional facility where your claim(s) arose have a grievance procedure?  |
| ₩ Yes  |
| No   |
| Do not know  |
| Does the grievance procedure at the jail, prison, or other correctional facility where your claim(s) arose cover some or all of your claims?   |
| ₩ Yes  |
| □ No   |
| Do not know  |
| both claim(s)?   |
|  |

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| D. | Did you file a grievance in the jail, prison, or other correctional facility where your claim(s) arose concerning the facts relating to this complaint?   |        |
|----|---|--------|
|    | ✓ Yes   |        |
|    | □ No  |        |
|    | If no, did you file a grievance about the events described in this complaint at any other jail, prison, or  |        |
|    | other correctional facility?  |        |
|    | Yes // C  |        |
| E. | If you did Stag pringers  |        |
| E. | If you did file a grievance:  |        |
|    | 1. Where did you file the grievance?  |        |
|    | Harris Court-, In   |        |
|    |   |        |
|    | 2. What did you claim in your grievance? That I was assaulted by stept and assaulted by Mal   | I You! |
|    | 3. What was the result, if any? What was the result, if any?  | r)     |
|    |   |        |
|    | 4. What steps, if any, did you take to appeal that decision? Is the grievance process completed? If not, explain why not. (Describe all efforts to appeal to the highest level of the grievance process.) |        |
|    | yes it's complete, this is the  |        |
|    | your design of the  |        |
|    | MY TI PY DUE MOCESIKEINS  | -      |
|    | Mext 5 tep pr Due Pioces Righert<br>procedulise Foder Civil Ruter & Prom  | ſ      |

| F.                                     | If you did not file a grievance:  |
|--|---|
|  | 1. If there are any reasons why you did not file a grievance, state them here:  |
|  | NO  |
|  | 2. If you did not file a grievance but you did inform officials of your claim, state who you informed, when and how, and their response, if any:  I represent the officials of your claim, state who you informed, when and how, and their response, if any:  POINT THEY SEND TO FRE a GYTELLANCE. I Wrote I.   |
| G.                                     | Please set forth any additional information that is relevant to the exhaustion of your administrative remedies.  The exhausted all of my administrative Republic (XRX) are onfile)  |
|  | (Note: You may attach as exhibits to this complaint any documents related to the exhaustion of your administrative remedies)  |
| Previo                                 | ous Lawsuits  |
| The "t<br>the fili<br>brough<br>malici | hree strikes rule" bars a prisoner from bringing a civil action or an appeal in federal court without paying ng fee if that prisoner has "on three or more prior occasions, while incarcerated or detained in any facility, at an action or appeal in a court of the United States that was dismissed on the grounds that it is frivolous, ous, or fails to state a claim upon which relief may be granted, unless the prisoner is under imminent of scrious physical injury." 28 U.S.C. § 1915(g). |
| To the                                 | best of your knowledge, have you had a case dismissed based on this "three strikes rule"?   |
| ☐ Y                                    | 'es   |
| N.                                     | lo  |
| If ves                                 | state which court dismissed your case, when this occurred, and attach a copy of the order if possible.  |
| ., ,                                   |   |

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| Α. | Have you filed other lawsuits in state or federal court dealing with the same facts involved in this action?   |
|----|--|
|    | DNO No Facts concerning this care etc.   |
| ₿. | If your answer to A is yes, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another page, using the same format.)  |
|    | 1. Parties to the previous lawsuit Plaintifi(s)  Defendant(s)  |
|    | 2. Court (if federal court, name the district; if state court, name the county and State)  |
|    | 3. Docket or index number  |
|    | 4. Name of Judge assigned to your case   |
|    | 5. Approximate date of filing lawsuit  |
|    | 6. Is the case still pending?  Yes  No   |
|    | If no, give the approximate date of disposition.   |
|    | 7. What was the result of the case? (For example: Was the case dismissed? Was Judgment entered in your favor? Was the case appealed?)  |
| C. | Have you filed other lawsuits in state or federal court otherwise relating to the conditions of your imprisonment?  NOT OVER MY CONDITIONS OF THE COURT OF THE CO |
|    |  |

| Pro Se 14 (Rev. 12 | (16) Complaint for Violation of Civil Rights (Prisoner)   |
|--------------------|---|
|                    | Yes   |
|                    |   |
|                    |   |
| D.                 | If your answer to C is yes, describe each lawsuit by answering questions 1 through 7 below. (If there is more than one lawsuit, describe the additional lawsuits on another page, using the same format.) |
|                    | Parties to the previous lawsuit  Plaintiff(3)   |
|                    | Defendant(s)  |
|                    | 2. Court (if federal court, name the district; if state court, name the gounty and State)   |
|                    |   |
|                    | 3. Docket or index number   |
|                    | 4. Name of Judge assigned to your case  |
|                    | 5. Approximate date of filing lawsuit   |
|                    | 6. Is the case still pending?   |
|                    | ☐ Yes ☐ No  |
|                    | If no, give the approximate date of disposition   |
|                    | 7. What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)   |
|                    |   |
|                    |   |
|                    |   |

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### IX. Certification and Closing

B.

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

# A. For Parties Without an Attorney

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

| Signature of Plaintiff    | Jasechan /   | Namo I                                  |  |
|---------------------------|--|---|--|
| Printed Name of Plaintiff | T X  | SCHIATHAN                               | RUSSEU   |
| Prison Identification #   | 0724-60  |   |  |
| Prison Address            | 1200 Bake  | rSt.                                    | populari de la companya de la compa |
|                           | Houston  | State                                   | 2ip Code   |
| For Attorneys             |  |   |  |
| Date of signing:          |  |   |  |
| Signature of Attorney     |  |   |  |
| Printed Name of Attorney  | All and a second a | *************************************** | ***************************************  |
| Bar Number                | Control of the second of the s | *************************************** |  |
| Name of Law Firm          |  |   | ~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~   |
| Address                   |  |   |  |
|                           | City   | State                                   | Zip Code   |
| Telephone Number          |  |   |  |
| E-mail Address            |  | ······································  | ***************************************  |